

# ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1400 W. Washington, Room 240, Phoenix, Arizona 85007-2937

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www.vetboard.az.gov

## CHANGE OF SCOPE OR SERVICES FOR ANIMAL CREMATORY LICENSE

### CURRENT INFORMATION

Crematory # \_\_\_\_\_ Crematory Name: \_\_\_\_\_

Crematory Address: \_\_\_\_\_  
Street Address City State Zip Code

Mailing Address: \_\_\_\_\_  
Street Address City State Zip Code

Crematory Telephone # \_\_\_\_\_

### REASON FOR CHANGE REQUEST:

☐ **Name Change**

Change Crematory Name to: \_\_\_\_\_

☐ **Scope of Service Change**

**A.R.S. § 32-2292(C).....If there are major changes in the scope of animal crematory services offered, the animal crematory is subject to re-inspection.**

☐ **Additions** or ☐ **Reductions in Service**

**Which type(s) of services are being changed? Please provide a brief description.**

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Printed Name of Responsible Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Responsible Owner: \_\_\_\_\_

Please note that your request will be submitted to the Board for approval